

DRUG ENDANGERED CHILDREN'S (DEC) PROTOCOL FOR PIERCE COUNTY

- Washington State Legislature passed the Drug Endangered Children's Law in June of 2000. This law was based on similar legislation in the state of California that already existed. This legislation mandated that any children found at methamphetamine lab *SITES* be placed in protective custody and Child Protective Services be notified.
- The law also allowed for a mandatory two-year enhancement on any UMCS – Unlawful Manufacturing of a Controlled Substance – conviction for having a child present.
- As of March of 2002, the Washington State Legislature passed bill 2610 which mandates a felony child endangerment charge to any person who has their children present at a methamphetamine lab irregardless of whether they are charged with the manufacturing of methamphetamine.
- Agencies in Pierce County developed a protocol for children found in methamphetamine labs in order to coordinate a collaborative approach to best serve the child's needs. These agencies include:
 - Pierce County Sheriff's Department's Meth Lab Team
 - Tacoma Police Department's Meth Lab Team
 - Child Protective Services
 - Mary Bridge Hospital/Child Advocacy Center/Child Abuse Intervention Department
 - Pierce County Public Health Department
 - Pierce County Code Enforcement
 - Attorney General's Office
 - Pierce County Prosecutor's Office
 - As of the fall of 2001, Good Sam Hospital
- Pierce County has one CPS worker assigned to the project to work with all of the above named agencies. Referrals come to the CPS worker in one of two ways.
 1. Law enforcement finds a child at a methamphetamine lab and the child is placed in protective custody.
 2. Persons in the community make referrals to CPS. The CPS worker then investigates the referrals with the assistance of law enforcement given the significant safety concerns. Should a methamphetamine lab be present, the children are placed in protective custody.

- Once a child is placed in protective custody, the CPS worker adheres to the following protocol:
 - CPS worker responds to the scene to pick up the child or picks up the child from school.
 - During business hours, contacts the Mary Bridge Child Advocacy Center to see if an appointment can be scheduled. If not, child is taken to either the Mary Bridge or Good Sam emergency rooms.
 - Medical exam must be conducted within 24 hours of initial placement. The exam includes a respiration check, full physical, a urinalysis, and a blood draw.
 - CPS worker conducts the initial interview of the child and forwards all appropriate reports to law enforcement and the Prosecuting Attorney's Office.
 - Child is then placed in a receiving home, usually the Cedar House receiving home program. A relative search is initiated to see if a family member who passes a background check and home study can take the child.
 - CPS worker will consult with the CPS supervisor and Attorney General's Office regarding the legal status of the case, specifically if a dependency should be initiated or if relative third-party custody should be initiated. In rare instances, parents will engage in services on a voluntary and informal basis in order to reunify with the children without court intervention.
 - CPS worker contacts the Public Health worker to ensure that, when possible, the Health Department will test the site for contamination. These reports are then forwarded to the CPS worker. CPS worker or law enforcement then contacts the Code Enforcement worker.

- BENEFITS
 - Law enforcement officers are not tied up with child placement.
 - CPS is allowed to respond to the scene to help the child. CPS worker is trained in child issues.
 - Collaborative effort amongst all of the agencies provides a comprehensive approach to the protection of children.